

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>NA</i>	<i>70811</i>	<i>5/30</i>
O.I.P.E. CLASSIFIER	<i>EA</i>	<i>601215</i>	<i>6-7-00</i>
FORMALITY REVIEW			<i>7/19/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4/13/03
2	✓	✓	12/13/03
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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11	✓	✓	
12	✓	✓	
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43	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	4/30/03
52	✓	✓	12/14/03
53	✓	✓	
54	✓	✓	
55	✓	✓	
56	✓	✓	
57	✓	✓	
58	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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